



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

| PART I LOBBYIST | | | |
|---|---------|------------------------|-----------|
| NAME (Last) | (First) | (Middle) | TELEPHONE |
| GEMINIANI | M. | VICTOR | 527 8020 |
| MAILING ADDRESS (Street) | | | FAX |
| 924 BETHEL ST | | | 527 8088 |
| (City) | (State) | (Zip Code) | |
| Honolulu | HI | 96813 96813 | |
| EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) | | | TELEPHONE |
| LEGAL AID SOCIETY OF HAWAII | | | 527 8070 |
| MAILING ADDRESS (Street) | | | FAX |
| 924 BETHEL ST | | | 527 8088 |
| (City) | (State) | (Zip Code) | |
| Honolulu | HI | 96813 96813 | |

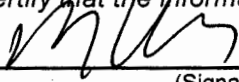
| PART II ORGANIZATION | | | |
|--|---------|------------------------|-----------|
| NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) | | | TELEPHONE |
| LEGAL AID SOCIETY OF HAWAII | | | 527 8070 |
| MAILING ADDRESS (Street) | | | FAX |
| 924 BETHEL ST | | | 527 8088 |
| (City) | (State) | (Zip Code) | |
| Honolulu | HI | 96813 96813 | |
| NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT | | | TELEPHONE |
| WAYNE KEANE | | | 527 8060 |
| MAILING ADDRESS (Street) | | | FAX |
| 924 BETHEL ST | | | 527 8088 |
| (City) | (State) | (Zip Code) | |
| Honolulu | HAWAII | 96813 96813 | |

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

| | | | |
|---|--|---|---|
| <input type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input checked="" type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operations & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input checked="" type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | _____ |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

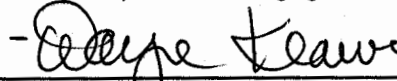
1/17/05

(Date)

PART V AUTHORIZATION TO LOBBY

| | | | |
|--------------------------------------|---------|--|--|
| NAME | | TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED | |
| | | Wayne Keawe | |
| NAME OF ORGANIZATION (if applicable) | | TELEPHONE | |
| CEGAC AND SOCIETY OF HAWAII | | 527 810 | |
| MAILING ADDRESS (Street) | | FAX | |
| 921 BETHEL ST. | | 527 888 | |
| (City) | (State) | (Zip Code) | |
| Honolulu | HI | 96813 | |

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

1/17/05

(Date)